## The Warehouse Athletic Facility PRESENTS "Jump the Gun" Jamboree 2009 A Pre-Season Tune-Up An AAU Certified Event Saturday, October 10, 2009

LOCATION: 800 North Hamilton, Spokane, Washington 99202 (Directly across from Gonzaga University)

DIVISIONS: Boys & Girls, 4th-9th Grade

**COST:** \$60/ game- minimum of two games- maximum of four games.

**GAMES:** Teams may choose to play two, three, or four games. In order to provide the most productive tune-up opportunity, we will <u>attempt</u> to place teams with opponents of similar experience and skill levels. Please indicate what best describes your team's playing level on the attached registration form. Options are Novice, Competitive, or Elite. Games will begin at approximately 8:00am Saturday morning and finish approximately 9:00pm on Saturday night.

**AAU CERTIFICATION:** The WAREHOUSE AAU "Jump the Gun" basketball jamboree is sanctioned by Inland Empire AAU. All participating players and coaches must have a 2010 AAU Card. For information on obtaining a membership card, please go to the Inland Empire website: <u>www.ieaau.org</u> or by phone:(509) 453-2696. The card fee is <u>not</u> included in registration. <u>All rosters will be checked</u>. Individuals without cards will result in team disqualification from the event.

**REGISTRATION:** Team registration form and entry fee, must be submitted by Wednesday, October 1, 2009:

Please send jamboree registration and fee to: The WAREHOUSE

P.O. Box 9786 Phone: (509) 484-2670 Spokane, WA 99209 Fax: (509) 484-2669

*Please Note:* Team roster may be modified at any time prior to the first game by written notice to the tournament director. No additions or changes will be permitted following the start of the first game. The use of a non-registered player will result in disqualification of the team for the entire event.

**REFUND POLICY:** Team cancellations made prior to October 1<sup>st</sup>, 2009 will receive a 75% refund of the total paid entry fee. No refunds will be given for team cancellations made after October 1, 2009. <u>This refund policy will be enforced in order to ensure the</u> <u>continued integrity of our events.</u> If you have any questions, please contact Jared at (509) 484-2670 or <u>jared@warehouseathletics.com</u>.

## **REGISTRATION DEADLINE: WEDNESDAY, OCTOBER 1, 2009**



## "Jump the Gun" Jamboree 2009 Team Registration Form Registration Deadline: Received by October 1, 2009

	PLEASE PRINT CLEARLY
Contact Person:	Cell Phone: () City:State:Zip: Cell Phone:()
Address:	City: State:Zip:
Coach:	Cell Phone:()
Coach/Contact Email Address: (REQU	IRED):
Coach 2009 AAU #	
Team Name:	City Representing:
Circle what best describes your team	s current experience & skill level: NOVICE -COMPETITIVE- ELITE
	Saturday, October 10, 2009
	Division (check one):
<u>GIRLS</u>	BOYS
4 <sup>th</sup> Grade Girls	4 <sup>th</sup> Grade Boys
5 <sup>th</sup> Grade Girls	5 <sup>th</sup> Grade Boys
6 <sup>th</sup> Grade Girls 7 <sup>th</sup> Grade Girls	6 <sup>th</sup> Grade Boys 7 <sup>th</sup> Grade Boys
7 Grade Girls	7 Grade Boys
9 <sup>th</sup> Grade Girls	9 <sup>th</sup> Grade Boys
	rerified through your local Association. Provide all information requested
Name: First Last	School 2009 AAU #
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
Assistant Coach:	
Assistant Coach:	
Teams will be accepted into the tourn	amont on a first same first carved basis. Places note: teams are

Teams will be accepted into the tournament on a first come-first served basis. Please note: teams are considered FULLY registered when <u>COMPLETE roster and entry fee</u> have been received.

SEND REGISTRATIONS AND FEES TO:		Games @\$60/game= \$
The WAREHOUSE		-
P.O Box 9786		Total Enclosed \$
Spokane, WA 99209	Payment By:C	heckMoney OrderVISAMasterCard
Phone: (509) 484-2670	Cardholder's Name	
Fax: (509) 484-2669	Account No	Expiration Date
	Signature	

**Registration Payment** 

## AAU Member Club Compliance Form CONCUSSION LAW REQUIREMENTS Required by AAU Event Operators to participate in AAU sanction events.

HB1824, otherwise known as the Zachery Lystedt Law, was signed into law on May 14, 2009. It requires, as of July 26, 2009, that additional steps be taken regarding concussions in private non-profit youth athletic programs using school district facilities.

This bill requires training and documentation which AAU Member Clubs must adhere to. AAU players and their parents/guardians must meet these minimum requirements:

- 1. All AAU member coaches will have to take training on the nature and risk of concussions and head injury including continuing to play after a concussion or head injury.
- 2. On a yearly basis, a concussion and head injury information sheet shall be signed and returned by the youth athlete and athlete's parents/guardian prior to the youth athlete's initiating practice or competition.
- 3. All athletes suspected of suffering a concussion or brain injury will be removed from practice or competition and not returned to play until cleared in writing by a licensed health care provider trained in the evaluation and management of concussions (Medical Doctors, Doctor of Osteopathy, Advanced Registered Nurse Practitioner, Physicians Assistants, and *Certified* Athletic Trainers).

Warehouse Athletic Facility Compliance Statement for HB1824 Youth Sports-Head Injury Policies					
This page must accompany each Tournament Entry form. Participation in AAU Sanctioned Events will not be granted until this page is returned and requirements of this application are complete and approved by The Warehouse Athletic Facility.					
Team:	Division:				
Club	Club Number:				
As the AAU Club contact I verify all coaches, athletes and their parent/guardian have complied with mandated policies for the management of concussions and head injuries as prescribed by HB 1824, section 2.					
Signed:					
AAU Club Contact	Position with AAU Club	Date signed			